



STATE OF GEORGIA
GEORGIA TECHNOLOGY AUTHORITY

ADDENDUM NUMBER: 04

DATED: March 27, 2001

REQUEST FOR PROPOSAL NUMBER GTA-000011 FOR:

**The Georgia Department of Community Health and The Board of Regents
of the University System of Georgia
Third Party Administration and System Integration**

The attached information is made a part of this RFP. The purpose of this addendum is to provide the following:

- 1) Revisions and additions to the RFP and Appendices, as summarized in the attached Table of Amendments; and
- 2) Amended and/or replacement sections of the RFP and/or Appendices, as identified in the attached Table of Amendments and attached to this notice.

Information concerning this solicitation may be found at:

<http://www.gagta.com>

Then select "Request for Proposal", "Submit", "Edit", "Find in Page", enter RFP number, "Find Next", double click "Specifications". This will have RFP Q&A and any clarifications, schedule changes, and other important information.

Bidders should check these electronic pages daily!

Note: Review Carefully!

In the event of a conflict between previously released information and the information contained herein, the latter shall control.

NOTE: A signed acknowledgment of this addendum (this page) should be attached to your RFP response. A signature on this addendum does not constitute your signature on the original RFP document. The original RFP response must also be signed in the proper places.

Company Name: _____
Contact Name: _____
Title: _____
Address: _____
Telephone: _____ Fax: _____
E-mail: _____

REQUEST FOR PROPOSAL NUMBER GTA-000011
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Table of Amendments

Amendment		Amended Document		Document Location		
No.	Date	Document	Page(s) ¹	Section No.	Section Heading	New or Revised Text is Highlighted in Green
4	3/27/01	RFP	Cover Page	N/A	Cover Page	Please note that you must sign the Amendment 4 Cover page and attach it to your RFP response.
4	3/27/01	RFP	2	N/A	Proposal Letter	It is understood and agreed that this proposal shall be valid and held open for a period one hundred eighty (180) days from proposal opening date.
4	3/27/01	RFP	5	List of Appendices	List of Appendices	Add the following two appendices: Appendix S, Membership Enrollment Management System, and Appendix T, Member Lock-In and Case Management
4	3/27/01	RFP	7	1.1.2.4	Simplification of Program Administration	Routine management means the day-to-day oversight and management of subcontractor performance.

¹ This is the page number in the RFP issued on the GTA website on 02/14/01.

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4	3/27/01	RFP	7	1.1.2.4	<u>Simplification of Program Administration</u>	Medicaid SURS staff are currently responsible for administering member lock-in and case management activities. In the future, however, DCH may wish to subcontract these responsibilities to a case management vendor, and will thus require the Prime Contractor to assume responsibility for managing this vendor. To familiarize bidders with the operational responsibilities that this type of vendor would have, we are providing a summary of the lock-in program and operational requirements. This information is provided in Appendix T, Member Lock-in and Case Management.
4	3/27/01	RFP	8-9 18	1.1.2.8 1.1.5.4	Technological Improvement Use of Modern and Flexible Information Technologies	Clarification : Please note that although DCH will consider solutions that wrap Internet technology around existing systems, proposals for single system, single platform solutions will receive a more positive evaluation response from a technical perspective.

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4	3/27/01	RFP	18	1.1.5.5	Continuous Technology Refresh and Upgrades	<p>Clarification:</p> <p>As specified in Appendix L, the cost for Continuous Technology Refresh is to be included in the Third Party Administration fee, not billed separately. Services included in this Continuous Technology Refresh include:</p> <ul style="list-style-type: none"> ▪ Improving delivery of services to DCH clients via both technology and service delivery upgrades; ▪ Keeping systems current with industry standard and future information technology developments; ▪ Providing an annual technology assessment report and recommendations for improvement; and ▪ Presenting new developments in healthcare information processing technology to DCH, including cost justifications for any additional costs associated with these upgrades.

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						<p>DCH specifically wishes to avoid having to authorize additional cost change orders for maintaining and making improvements to systems and processes covered by this contract. DCH believes that many information technology initiatives will be cost justified based on reductions in personnel costs (e.g., implementation of web and IVR communications technologies) and rework costs (e.g., elimination of data keying errors via the use of EDI). Requests for additional cost change orders may be considered by DCH, but should be based on changes in the scope of services required under the contract, not the manner of providing existing services under the contract.</p> <p>See also Attachment 6, the replacement version of Appendix L, Cost Proposal.</p>

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4	3/27/01	RFP	10	1.1.3.2	Provide Claims Administration Services First Paragraph	The prime contractor will have a direct, on-going responsibility for providing claims administration and customer services for SHBP, BORHP, Medicaid, and PeachCare for Kids. The scope of the services would include those services currently performed by the incumbent Medicaid SUR vendor, Outsourced Administrative Services, Inc. (OASYS), including surveillance and utilization review (SUR) recipient and peer review services for Medicaid and PeachCare for Kids. See Appendix L for similar services for SHBP and BORHP that will be assumed at a later date.

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4	3/27/01	RFP	12	1.1.4.2. Last Bullet on page 12	Interface with GHBC Credentialing System – extract requirements for GBHC	Clarification: A list of data elements for the GHBC extract includes: <ul style="list-style-type: none"> ▪ Provider Medicaid Number ▪ Provider Name ▪ Provider Professional Title ▪ Provider Address ▪ Provider Telephone Number ▪ Provider License Number ▪ Provider Federal Tax ID ▪ Provider Social Security Number ▪ Provider Specialty Code ▪ Provider Category of Service ▪ Provider Enrollment/Eligibility Status ▪ Provider Enrollment Effective and End Dates ▪ Additional Provider GBHC Data for individuals and groups including the following: <ul style="list-style-type: none"> ▪ Provider GBHC GAM ID ▪ Provider GBHC Establish Patient Indicator ▪ Provider GBHC Office Hour Telephone Number

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						<ul style="list-style-type: none"> ▪ Provider GBHC After Hour Telephone Number ▪ Provider GBHC Patient Maximum and Current Count ▪ Provider GBHC Special Needs Codes ▪ Provider GBHC County Codes ▪ Provider ▪ GBHC Group Provider Number ▪ Provider GBHC Group Individual Provider Number ▪ Provider Physician Assistant Name ▪ Provider Physician Assistant License Number

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4	3/27/01	RFP	12	1.1.4.3	Potential To Share In Cost Savings	<p>Please add the following paragraphs to section 1.1.4.3:</p> <p>Cost savings initiatives occur after the system has been implemented and is in operation. DCH will consider paying for proposals from the prime contractor that are aimed at providing DCH with prime contractor vendor administrative cost savings which include a reduction in the monthly fee paid to the prime contractor. As stated in the RFP, DCH will share 5% of the administrative savings with the prime contractor for accepted proposals.</p> <p>DCH will negotiate reductions in the Prime Contractor's fees that are the result of cost savings initiatives.</p> <p>Note: This section has also been added to the attached replacement version of Appendix I, as the last paragraphs in the section titled "III. Cost Savings Incentive Payments" on page I-6.</p>

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4	3/27/01	RFP	13	1.1.4.4	<p>Role of Government Project Team</p> <p><i>DCH/BOR Overall Responsibilities,</i></p> <p>Bullet #3</p>	<p>Clarification:</p> <p>This section indicates that DCH/BOR will define services that require prior approval and pre-certification. Appendices D and E identify services that require prior approval. The requirement also applies to Medicaid. For Medicaid, there are an estimated 237,700 prior authorizations done each year for services. The following services currently require prior approval:</p> <ul style="list-style-type: none"> ▪ Home Health ▪ CCSP (Community Care Service Program) ▪ MRWP (Mental Retardation Waiver Program) ▪ CHSS (Community Habilitation and Support Service) Waiver Program ▪ PASARR (Preadmission Screening and Annual Resident Review) ▪ TRIS (Therapeutic Residential Intervention Services) ▪ ICWP (Independent Care Waiver Program)

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						<ul style="list-style-type: none"> ▪ Select inpatient and outpatient hospital care (with audit limitations): ▪ Physician office visits exceeding 12/year ▪ Certain elective outpatient procedures performed in the physician's office ▪ Certain dental procedures and amounts over \$800 ▪ Out-of-state treatment requiring short term provider enrollment (cases go to current vendor (GMCF) for approval)
4	3/27/01	RFP	21	1.4	Restrictions on Communications With Staff	<p>Please add the following paragraph to this section:</p> <p>From the issue date of this RFP until a prime contractor is selected, and the selection announced, bidders are not allowed to communicate for any reason with any state staff except through the contracting officer named herein, or during the Bidders' Conference, or as provided by existing work agreement(s).</p>

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4	3/27/01	RFP	23	1.6	Contract Term Paragraph after the table	<p>Please revise the paragraph following the table in Section 1.6 as follows:</p> <p>The effective dates of services noted above represent fixed deadlines. The selected vendor(s) must commit to meeting them or incur substantial liquidated damages or reductions in reimbursement, as appropriate, for delays. See Appendix A.</p>
4	3/27/01	RFP	25	2.2.1	Division of Medical Assistance Paragraph 5, Third Bullet	<p>Express Scripts—Pharmacy Benefits Manager— Note that although EDS has been responsible for payment of prescription drug claims in the past, Express Scripts will assume this responsibility in the future;</p>
4	3/27/01	RFP	36	3.3	Vendor Requirements and Characteristics	<p>Please correct the reference to the support date for BORHP Open Enrollment to read September 2003. (The section incorrectly states this date as November 2003.)</p>

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4	3/27/01	RFP	36	3.3	<p>Vendor Requirements and Characteristics</p> <p>Middle of page 36, under the paragraph beginning with “In addition, DCH has the following requirements:”, 3rd bullet.</p>	<p>Please revise the third bullet under this paragraph to read:</p> <ul style="list-style-type: none"> ▪ The contract must state that administrative fees cannot be changed except on the contract anniversary, and that written notice must be provided at least six (6) months prior to the end of the rate guarantee period. Additionally, the prime contractor must commit to a firm fixed price for implementation costs and the first three (3) operational years for each program. Thereafter, the operational costs may be adjusted by up to the previous twelve (12) months’ Consumer Price Index-All Urban Consumers (CPI-U). For the purposes of this proposal, bidders are instructed to assume CPI-U, during this time period, is five (5) percent. Further, bidders need to supply cost data for the first five (5) years of the contract. The remaining option years will be negotiated during the fifth and sixth year, respectively.

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4	3/27/01	RFP	37	3.3.1	Vendor Characteristics, 4 th Bullet	<p>Please revise the fourth bulleted item on page 37 as follows:</p> <p>Ability to routinely consolidate pharmacy benefits manager, health claims, utilization manager, and other data sets via ad hoc requests, as described in Section 1.1. Ad hoc requests will require a response from the contractor within 3 business days; the response must state an understanding of the problem and the estimated completion date. DCH will review the estimate for reasonableness and will approve the proposed plan for completion of the ad hoc work or request a change in the proposed completion date.</p>
4	3/27/01	RFP	40	3.4	Phasing of Work Paragraph 6	<p>Please replace Paragraph 6 with the following:</p> <p>Phase II—SHBP and BORHP. This second phase of work involves the implementation of a claims processing system, claims adjudication services, and customer service support function for the SHBP, on or before July 1, 2003, and the BORHP on or before January 1, 2004.</p>

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4	3/27/01	RFP	41	3.5	Deadlines Last paragraph	Please revise the last paragraph of this section as follows: These schedules and deliverables are fixed—the selected vendor(s) must commit to meeting them or else incur substantial liquidated damages or reductions in reimbursement, as appropriate, for delays.

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4	3/27/01	RFP	41	3.5	Deadlines	<p>Please insert the following as bullet #2 in Section 3.5 on page 41:</p> <ul style="list-style-type: none"> MEMS system replacement by 7/1/2002;

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4	3/27/01	RFP	41-42	3.6	Out of Scope Services First Bullet	<p>Please revises the first bullet as follows:</p> <p>Management of the DCH's pharmacy benefit manager, Express Scripts will continue to be managed directly by the DCH for the foreseeable future. As noted in this RFP, ESI began paying prescription drug claims for the BOR on 1/1/2001, and will begin paying prescription drug claims for the SHBP on 7/1/2001. ESI is also in the process of beginning to pay prescription drug claims for both Medicaid and PeachCare for Kids. Therefore, payment of the majority of prescription drug claims will be out of scope for the Prime Contractor, although there may be some undetermined volume of claims for consumables (i.e. DME) that members could pay for and legitimately send to the Prime Contractor for payment. Note that DCH has provided statistics on the current volume of prescription drug claims that are paid by the Medicaid Fiscal Intermediary (EDS) and by the SHBP/BOR claims administrator (BCBSGA) in Appendices D, E, and F. When reviewing these statistics, the bidder should bear in mind that payment of these prescription drug claims will be out of scope.</p>

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4	3/27/01	RFP	42	3.6	Out of Scope Services 7th Bullet	<ul style="list-style-type: none"> ▪ PeachCare for Kids eligibility determination and tracking system services currently provided by DHACS;
4	3/27/01	RFP (This change also applies to Amendment 1)	44	4.2	Minimum Administrative Submission Requirements	<p>Please revise the first bulleted item under this section as indicated below:</p> <p>Each proposal must include the following:</p> <ul style="list-style-type: none"> ▪ Answers to the questions posed in Section 4.6 (Proposal Content Requirements); 4.7 (Project Management Requirements); 4.8 (Project Approach); 4.9 (Security and Disaster Recovery); and 4.10 (Turnover);
4	3/27/01	RFP	45	4.2	Minimum Administrative Submission Requirements	<p>Please add the following sentence to the last bulleted item in this section:</p> <p>Please include Appendix M in Proposal Part I, along with other documents requiring signature.</p>
4	3/27/01	RFP	48	4.6.1.2	Financial and Insurance Information	<p>Please change the title of Section 4.6.1.2 to “Financial Information”.</p>

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4	3/27/01	RFP Appendix A Appendix L	51	4.7.2.1	Project Staffing During the Development and Implementation Period	Correction: Section 4.7.2 references June 4, 2001 as the first month of the contract; Appendix L (as amended, pages L-4 and L-5) references May 2001; and Appendix A (as amended) references contract award date of June 6, 2001. For costing purposes, please make these references consistent by using June 2001 as the first month of the contract.

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4	3/27/01	RFP	52	4.7.2.1	Project Staffing During the Implementation Period	<p>Please revise the second and third bullets on page 52 to read:</p> <ul style="list-style-type: none"> Resumes for all key staff members (two (2) page limit each); Two (2) recent business references for all key staff members (include name, organization, and phone number), and the employment status with the bidder;
4	3/27/01	RFP	53	4.7.5	Data Conversion	<p>Please revise the last sentence in Section 4.7.5 to read:</p> <p>The approach must include conversion of all systems currently in use that are a part of this procurement, including the MEMS (BCBS eligibility system for SHBP).</p>
4	3/27/01	RFP	63	4.8.2.5.2	Provider Inquiries	4.8.2.5. 3 Provider Inquiries
4	3/27/01	RFP	64	4.8.2.5.3	Provider Training	4.8.2.5. 4 Provider Training
4	3/27/01	RFP	64	4.8.2.5.4	Provider Handbook	4.8.2.5. 5 Provider Handbook
4	3/27/01	RFP	64	4.8.2.5.5	Nurse Aide Training Programs	4.8.2.5. 6 Nurse Aide Training Programs

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4	3/27/01	RFP	64	4.8.2.5.6	In-state Indemnity Physician Network	4.8.2.5. 7 In-state Indemnity Physician Network
4	3/27/01	Amendment 1, Attachment 23	55	4.8.2.9.4, 8 th Bullet	HEALTH CHECK (EPSDT)	Please delete the 8th bulleted item on page 55 as follows: “Run report of all Medicaid providers”.

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4	3/27/01	RFP	66	4.8.2.6	Claims Processing	<p>Please revise the 5th bulleted item (on page 66) in this list of claims processing services as follows:</p> <p>Provide cost avoidance for claims processing <u>and collection of claims overpayments (these responsibilities include provider refunds; insurance refunds for reimbursement of overpayments to insurance carriers; pay and report; and disposition of TPL checks)</u>, even though the other functions of third party recovery have been carved out of this procurement</p>
4	3/27/01	RFP	68	4.8.2.10 (numbered as 4.8.2.9 in the initial RFP; re-numbered as 4.8.2.10 in Amendment 1)	Customer Service Survey	<p>Please revise the second sentence of this section as follows:</p> <p>The DCH requires a customer service survey for all the DCH programs conducted at the end of the first six (6) months of the contract, and <u>every 6 months</u> thereafter</p>

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4	3/27/01	RFP	70	4.9.2	Software/Data Security Software System, General Clarification	<p>Clarification:</p> <p>If all of the specified restrictions can be accomplished through a user's security profile, it is not necessary to restrict access by workstation.</p> <p>It would be acceptable to suspend the user ID of the person attempting to log on as opposed to disconnecting the workstation or user, as indicated in the current list of items in this section.</p>
4	3/27/01	RFP	73	4.9.4	Backup and Disaster Recovery	<p>Please revise the 3rd sentence in the second paragraph on page 73 as follows:</p> <p>The prime contractor must describe in its proposal the approach to ensure development, maintenance, and execution of the disaster recovery and backup plan, including its "hot site" capability in the event of a local disaster and the precautions it has taken to assure backup of its data center, in the event of a disaster in the area where the data center is located.</p>

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4	3/27/01	RFP	75	4.10.1	(4.10, Turnover) General Requirements	<p>Please add the following clarification to the first bulleted item in this section:</p> <p>By “error free”, we mean that the system must be capable of accurately performing its intended functions at turnover. It is our expectation that the testing plan will be comprehensive and will allow sufficient time for the vendor to correct and re-test any identified errors. We do not want to implement a system with known errors that affect the functionality of the system or require manual workarounds at implementation. The state will be heavily involved in an oversight capacity during testing and both the state and the vendor, working closely to design the testing process, will determine what is an error. The purpose of the 180-day period is to provide a reasonable shakedown period after implementation. The vendor will be responsible for correcting all errors that are identified with the system, regardless of when they occur.</p>

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4	3/27/01	RFP	78	5.1	Bidder Evaluation (Paragraph 5)	The DCH will invite the bidder finalists to present their capabilities during an oral presentation at DCH during the week of May 21 , 2001 and a demonstration at representative facility/ facilities of the bidder during the week of May 28 , 2001. Further, the DCH reserves the right to request that bidders make additional presentations, either in person or by telephone, to the Evaluation Committee clarifying their bid and responding to questions from the Committee regarding their bid.
4	3/27/01	RFP	79	5.3	Evaluation of Technical Proposal	Please revise the last sentence of the first paragraph as follows: Forty (40) additional points may be awarded for bidders who comply with the Minority Business Policy and Tax Incentives Requirements described in Section 6.10, and demonstrate that the subcontractor provides value to the overall bid.

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4	3/27/01	RFP	80	5.4	Evaluation of Cost Proposal, Second Bullet	<p>Please revise the second bullet to read:</p> <ul style="list-style-type: none"> the Evaluation Committee determines that, at least, minimally acceptable scores have been achieved in the Technical Proposal for each scoring category. DCH defines minimally acceptable scores as 75% of the points from each category. DCH reserves the right to modify this threshold level if it is in the best interest of the state to do so.

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4	3/27/01	RFP	81	5.4	Evaluation of Cost Proposal	<p>Please revise the second paragraph on page 81 to read:</p> <p>Accordingly, the initial contract term will be one (1) year, renewable annually for up to an additional four (4) years. If every annual renewal occurs, the contract would potentially run from the initial contract award date through June 30, 2006, with two (2) renewable one-year options (through June 30, 2008). Please see Amendment #4, Attachment #1, Section 6.4 for further clarification. Bidders should bid firm, fixed prices through June 30, 2005. Subsequent to that date, prices for each year's upcoming services may be adjusted by up to the previous 12 months' CPI-U. For the purposes of this proposal, bidders are instructed to assume the CPI-U during this time period is five (5) percent. Further, bidders need to supply cost data for the first five (5) years of the contract.</p>
4	3/27/01	RFP	82	5.4	Evaluation of Cost Proposal	<p>Please delete the last paragraph as indicated below:</p> <p>Bidders may fulfill this obligation through a subcontract for any services related to this contract by utilizing small, minority, or women's business as suppliers of goods or services. Up to an additional 40 points may be awarded. Reference Section 6.10.</p>

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4	3/27/01	RFP	84	6.4	Period of Performance	Replace Section 6.4 Period of Performance. See Attachment 1.
4	3/27/01	RFP	85	6.10	Minority Business Policy and Tax Incentive	Please revised the last sentence on page 85 to read: Bidders interested in taking advantage of the state income tax incentives, relative to the use of minority subcontractors in the performance of contracts awarded by the state, should address their questions to the State Small and Minority Business Director. The State Small and Minority Business Director is Irving Mitchell; he can be contacted at (404) 651-7766.
4	3/27/01	RFP	NEW	6.15 (New)	Protest Procedures	Section 6.15 has been added. See Attachment 2.
4	3/27/01	Appendix A	A-1	N/A	Schedule of Events Contract Posting Date Intent to Bid Letter Due Date	Please replace Appendix A, Schedule of Events, with the version provided in Attachment 10. Note that the contract posting date and the due date for the Intent to Bid Letter have been changed.

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4	3/27/01	Appendix C	C-3	Appendix C	Definitions	Please add the following definition. Run Out —Synonymous with turnover; is defined as the assistance that would be provided by the Prime Contractor prior to the conclusion of the contract, or prior to termination, to turn over any and all pieces of the Georgia account to the State or its designated agent, as described in Section 4.10 of the RFP. Additionally, run-out and turnover include providing claims administration and customer support for any claims with dates of service up to the date of either conclusion or termination of the contract.
4	3/27/01	Appendix H	All	Appendix H	Project Stages, Milestones, and Deliverables	Attachment 3 replaces the earlier version of Appendix H.
4	3/27/01	Appendix I	All	Appendix I	Performance Standards and Goals	Attachment 4 replaces the earlier version of Appendix I.
4	3/27/01	Appendix J	All	Appendix J	Functional Requirements Matrices	Attachment 5 replaces the earlier version of Appendix J.

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4	3/27/01	Appendix L	All	Appendix L	Cost Proposal Requirements	Attachment 6 replaces the earlier version of Appendix L.
4	3/27/01	Appendix O	All	Appendix O	Mandatory Minimum Contractor Requirements	Attachment 7 replaces the earlier version of Appendix O.
4	3/27/01	Appendix S	All	Appendix S	Membership Enrollment Management System	Add Appendix S—Membership Enrollment Management System. See Attachment 9
4	3/27/01	Appendix T	All	Appendix T	Member Lock-In and Case Management	Add Appendix T—Member Lock-In and Case Management. See Attachment 9
4	3/27/01	Questions and Answers Table	N/A	Answers to Questions 121, 151, 247, 404	N/A	Answer indicates that modifications will be made to the RFP in Amendment #3. This should state Amendment #4 for the questions listed.